

# County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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November 2, 2017

To:

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From: 🌴

Brandon T. Nichols

Acting Director

# HAMBURGER HOME DBA AVIVA FAMILY AND CHILDREN'S SERVICES FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of the Hamburger Home dba Aviva Family and Children's Services Foster Family Agency (the FFA) in April 2017. The FFA has one office located in the Third Supervisorial District and provides services to the County of Los Angeles DCFS placed children. According to the FFA's Program Statement, its stated purpose is "to provide specialized supportive foster care homes in Los Angeles County, and thereby maximize the children's potential for optimal growth and development."

At the time of the review, the FFA supervised 46 DCFS placed children in 20 Certified Foster Homes (CFHs). The placed children's average length of placement was 15 months and their average age was eight.

# **SUMMARY**

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe in the FFA CFHs; having been provided with good care and appropriate services; being comfortable in their placement environment; and being treated with respect. The Certified Foster Parents (CFPs) reported being supported by the FFA staff in their efforts to provide care and supervision to the children placed in their homes.

The FFA was in full compliance with 7 of 11 applicable areas of CAD's Contract Compliance Review: Education and Workforce Readiness; Health and Medical Needs;

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Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

CAD noted deficiencies in the following areas: Licensure/Contract Requirements, related to Special Incident Reports (SIRs) not submitted timely; Certified Foster Homes, related to the CFP not maintaining a current vehicle registration; Facility and Environment, related to a CFH not maintaining the exterior and the grounds: bricks were scattered around the backyard, three window screens were torn, and comprehensive monetary and clothing allowance logs were not maintained; and Maintenance of Required Documentation and Service Delivery, due to updated NSPs not being comprehensive.

Attached are the details of CAD's review.

#### **REVIEW OF REPORT**

On May 24, 2017, Rosalind Arrington, DCFS CAD, and Kirk Barrow, DCFS Out-of-Home Care Management Division (OHCMD), held an exit conference with the FFA representatives: Karina Souquette, Assistant Vice President of Foster Care/Adoptions/Intensive Treatment Foster Care and Bridgette Baca, Director of Foster Care. The FFA representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve the FFA's compliance with regulatory standards; and were in agreement with addressing the noted deficiencies in a Corrective Action Plan (CAP).

The FFA provided the attached approved Compliance CAP addressing the recommendations noted in this compliance report.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager at (213) 351-5530.

BTN:KR:LTI:ra

#### Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Terri L. McDonald, Chief Probation Officer
Sheila Mitchell, Chief Deputy Probation Officer, Juvenile Services
Public Information Office
Audit Committee
Regina Bette, President and CEO, Hamburger Home dba Aviva Family and Children's Services
Lenora Scott, Regional Manager, Community Care Licensing Division

# HAMBURGER HOME DBA AVIVA FAMILY AND CHILDREN'S SERVICES FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW SUMMARY

License Number: 197804104

	Contract Compliance Review Findings: April 2017				
1		tract Requirements (7 Elements)			
9	2. Timely, o (SIRs). 3. Runaway	otification for child's relocation. cross-reported Special Incident Reports procedures. hity Care Licensing Division (CCLD)	<ol> <li>Full Compliance</li> <li>Improvement Needed</li> <li>Full Compliance</li> <li>Full Compliance</li> </ol>		
	citations/ (OHCMD 5. FFA ensi Family H 6. FFA pays payments	Out-of-Home Care Management Division ) safety reports: ures complete required Whole Foster ome (WFFH) training. s Certified Foster Parents (CFPs) WFFH s.	<ul><li>5. Not Applicable</li><li>6. Not Applicable</li></ul>		
		ducts an assessment of CFPs prior to nt of two or more children.	7. Full Compliance		
11	<b>Certified Foste</b>	r Homes (12 Elements)			
	Home stu      to certific	udy and safety inspection conducted prior eation.	1. Full Compliance		
		quiry with OHCMD for historical on prior to certification.	2. Full Compliance		
	Bureau o Departme	riminal clearances from the Federal of Investigation (FBI), California ent of Justice (DOJ), and Child Abuse ondex (CACI) prior to certification.	3. Full Compliance		
		ompleted, and signed criminal and statement.	4. Full Compliance		
	certificati		5. Full Compliance		
	6. All require	ed training prior to certification.	6. Full Compliance		
	7. Certificate	e of approval on file including capacity.	7. Full Compliance		
	months o	spection completed at least every six or per approved Program Statement.	8. Full Compliance		
	Re-certifi Resuscita certificate		9. Full Compliance		
	insurance	California Driver's License (CDL), auto e and annual vehicle maintenance tation for CFPs and designated drivers.	10. Improvement Needed		

## HAMBURGER HOME DBA AVIVA FAMILY AND CHILDREN'S SERVICES FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW PAGE 2

	11. Criminal clearances from the FBI, DOJ and CACI; health screening and TB test; auto insurance and	11. Full Compliance
	current CDL for other adults in the home.  12. FFA assists CFPs in providing transportation needs.	12. Full Compliance
111	Facility and Environment (7 elements)	
	<ol> <li>Exterior grounds well maintained.</li> <li>Common quarters well maintained.</li> <li>Children's bedrooms well maintained.</li> <li>Sufficient recreational equipment and educational resources (e.g. computer).</li> <li>Adequate perishable and non-perishable food.</li> <li>CFP conducted disaster drills and documentation</li> </ol>	Improvement Needed     Full Compliance     Full Compliance     Full Compliance     Full Compliance
-	maintained.	6. Full Compliance
	7. Money and clothing allowance logs maintained.	7. Improvement Needed
IV	Maintenance of Required Documentation and Service Delivery (9 Elements)	
	<ol> <li>FFA obtained or documented efforts to obtain DCFS Children's Social Worker's (CSW's) authorization to implement Needs and Services Plans (NSPs).</li> </ol>	1. Full Compliance
	2. CFPs participated in development of the NSPs.	2. Full Compliance
	<ol> <li>Children progressed towards meeting NSP goals.</li> <li>FFA Social Workers developed timely, comprehensive Initial NSPs with the child's participation.</li> </ol>	Full Compliance     Full Compliance
	<ol> <li>FFA Social Workers developed timely, comprehensive Updated NSPs with the child's participation.</li> </ol>	5. Improvement Needed
	<ul><li>6. Therapeutic services received.</li><li>7. Recommended assessment/evaluations implemented.</li></ul>	Full Compliance     Full Compliance
	<ul><li>8. DCFS CSW's monthly contacts documented.</li><li>9. FFA Social Workers conducted required visits.</li></ul>	Full Compliance     Full Compliance
V	Education and Workforce Readiness (5 Elements)	
	Children enrolled in school within three school days.	Full Compliance (All)

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	2.	Children attended school as required, and FFA			
		facilitated in meeting the children's educational			
		goals.			
	3.	Children's report cards/progress reports			
	4	maintained.			
	4.	Children's academic performance and/or attendance increased.			
	_				
	5.				
		Development Services (YDS) or equivalent services and vocational programs.			
		services and vocational programs.			
VI	Health and Medical Needs (4 Elements)				
	1.	Initial medical exams conducted timely.	Full Compliance (All)		
	2.	Required follow-up medical exams conducted	Full Compliance (All)		
	2.	timely.			
	3.	Initial dental exams conducted timely.			
	4.	Required follow-up dental exams conducted timely.			
	"	roquired follow up defined example conducted timely.			
VII	Psyc	hotropic Medication (2 Elements)			
	1.	Current court authorization for administration of	Full Committee on (All)		
	. '	psychotropic medication.	Full Compliance (All)		
	2.	Current psychiatric evaluation.			
		Ourient psychiatric evaluation.			
VIII	Per	Personal Rights and Social/Emotional Well-Being			
		Elements)			
	,				
	1.	Children informed of FFA's policies and	Full Compliance (Ali)		
		procedures.			
	2.	Children feel safe in the Certified Foster Home			
		(CFH).			
	3.	CFPs' efforts to provide nutritious meals and			
		snacks.			
	4.	CFPs treat children with respect.			
	5.	Children allowed private visits, calls and to receive			
		correspondence.			
	6.	Children free to attend or not attend religious			
	_	services/activities of their choice.			
	7.	Children's chores are reasonable.			
	8.	Children informed about their medication and right			
		to refuse medication.			
	9.	Children aware of right to refuse or receive			
		voluntary medical, dental and psychiatric care.			

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	10.	Children given opportunities to participate in extracurricular, enrichment and social activities in the CFH, school and community.	
IX		onal Needs/Survival and Economic Well-Being ements)	
	1.	Clothing allowance provided in accordance with FFA Program Statement.	Full Compliance (All)
	2.	Adequate quantity and quality of clothing inventory.	
	3. 4.	Children involved in the selection of their clothing. Routine provision of all personal care items that meet ethnic needs including towels and toiletries.	
	5.	Minimum monetary allowances.	
	6. 7.	Management of allowance/earnings.	
	/.	Encouragement and assistance with a Life Book.	
X	Disc	narged Children (3 Elements)	
	1.	Completed discharge summary.	Full Compliance (All)
	2.	Attempts to stabilize children's placement.	
	3.	Child completed high school (if applicable).	
XI	Personnel Records (9 Elements)		
	1.	Timely criminal clearances from the FBI, DOJ and CACI.	Full Compliance (All)
	2.	Timely, completed and signed criminal background statement.	
	3.	FFA Social Workers met education/experience requirements.	
	4.	Timely employee health screening and TB clearances.	
	5.	Valid CDL and auto insurance.	
	6.	FFA employees signed copies of FFA policies and procedures.	
	7.	FFA employees completed all required training and documentation maintained.	
	8.	FFA Social Workers have appropriate caseload ratio.	
	9.	FFA maintained written declarations for part-time contracted FFA Social Workers caseloads not to exceed a total of 15 children.	

### HAMBURGER HOME DBA AVIVA FAMILY AND CHILDREN'S SERVICES FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW FISCAL YEAR 2016-2017

#### **SCOPE OF REVIEW**

The following report is based on a "point in time" review. This compliance report addresses findings noted during the April 2017 review. The purpose of this review was to assess the FFA's compliance with the County contract. The compliance review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Education and Workforce Readiness,
- Health and Medical Needs.
- Psychotropic Medication,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, six placed children were selected for the sample. CAD interviewed five of the children, as one child was pre-verbal (or too young to be interviewed). During the home visits, the children were observed to be comfortable and well cared for in the CFHs, and the CFPs were observed to be responsive to the children's needs. CAD reviewed the six children's files to assess the level of care and services the children received. Additionally, four discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, one placed child was prescribed psychotropic medication. This child's file was reviewed to assess for timeliness of Psychotropic Medication Authorization and to confirm the required documentation of psychiatric monitoring.

CAD reviewed three CFP files and two staff files for compliance with Title 22 Regulations and County contract requirements. Site visits were conducted to the FFA and the CFHs to assess the quality of care and supervision provided to the placed children.

# **CONTRACTUAL COMPLIANCE**

CAD found the following four areas out of compliance:

# **Licensure/Contract Requirements**

• SIRs are submitted timely.

CAD found that 3 of 7 SIRs reviewed were not submitted timely in accordance with the SIR Reporting Guidelines.

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An incident that occurred on August 25, 2016, was submitted into ITrack on September 13, 2016. A second incident that occurred on September 30, 2016, was submitted into ITrack on October 21, 2016.

#### Recommendations:

The FFA's management shall ensure that:

1. SIRs are submitted timely and cross-reported.

#### **Certified Foster Homes**

 Current California Driver's License, auto insurance and annual vehicle maintenance documentation for CFPs and designated drivers.

One CFP did not have a current vehicle registration because the vehicle required some repairs in order to pass a smog check. During the home visit, CAD learned that the CFP was transporting children in a vehicle (Saturn Outlook) with expired registration. CAD informed the CFP not to drive the vehicle until it is repaired, and the registration is renewed. CAD inspected another vehicle (BMW 328i) that the CFP will be driving temporarily until the Saturn is repaired and its registration is renewed. The BMW had current registration and insurance, and appeared to be in good working condition.

CAD immediately notified the FFA of this issue and the representative acknowledged the oversight in their vehicle safety inspection and agreed to train staff and make changes to their vehicle safety inspection policy.

# Recommendation:

The FFA's management shall ensure that:

2. All CFPs maintain a current vehicle registration.

# **Facility and Environment**

CFH's exterior and the grounds are well maintained.

The CFH's had bricks scattered throughout the backyard and three window screens were torn.

The CFPs removed the bricks from the backyard and replaced the three torn window screens by April 21, 2017. The CFPs sent pictures of the backyard without the bricks and with three new window screens to CAD and the FFA social worker. The FFA social worker confirmed that the bricks were removed and the three window screens were replaced.

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 Appropriate and comprehensive monetary and clothing allowance logs are maintained.

One child did not receive his weekly monetary allowance for June and July 2016 and received less than the required weekly allowance from August 2016 through March 2017. CAD notified the FFA of this discrepancy and verified the complete distribution of all past due monetary allowance to this child was made on May 31, 2017.

Two children's clothing receipts did not match the logs, the date/store name(s) were not on the receipts, and some receipts were missing all together. The files for the other two children had hand written receipts from the CFPs for August and September 2016. All five of the children's files had clothing receipts that were missing dates, or the date on the receipts were not readable.

### **Recommendations:**

The FFA's management shall ensure that:

- 3. The exterior and the grounds of the CFH are well maintained.
- 4. Monetary and clothing allowance logs are maintained.

# Maintenance of Required Documentation and Service Delivery

DCFS CSW's develop comprehensive Updated NSPs.

A child's NSP dated August 19, 2016 was not comprehensive as it was missing the FFA staff's signature.

Another child's NSP, dated December 14, 2016, was not comprehensive, as it did not have the correct start date for a new goal, the child's therapy sessions were not listed by date, it had a blanket statement, "Weekly therapy in home and school one time per week, with one family session per month;" the NSP dated March 14, 2017 had a goal listed in the achieved outcome goal section and did not match any goals from the previous NSP, dated December 14, 2017; and a goal that was in the NSP dated December 14, 2016, was completely missing in the NSP dated March 14, 2017.

#### Recommendation:

The FFA's management shall ensure that:

5. FFA Social Workers develop comprehensive, Updated NSPs.

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# PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S FFA CONTRACT COMPLIANCE REVIEW

The CAD's last compliance report dated April 25, 2017 (review conducted in June 2016), identified six recommendations.

#### Results:

Based on the results of this review, the FFA implemented 3 of the 6 recommendations for which the FFA was to ensure that:

- Annual vehicle maintenance records for all FFA homes are maintained.
- All children's bedrooms are comfortable and well maintained.
- The DCFS CSW's monthly contacts are documented in the child's case file.

The FFA did not implement 3 of the 6 recommendations for which the FFA was to ensure that:

- SIRs are submitted timely and cross-reported.
- The FFA is in full compliance with Title 22 Regulations and free of CCLD citations.
- Monetary allowance logs are maintained.

### **Recommendation:**

6. The three outstanding recommendations from the prior report noted in this report as recommendation numbers 1, 2 and 4 are fully implemented.

At the exit conference, the FFA representatives expressed their desire to remain in compliance with Title 22 Regulations and contract requirements. The FFA will consult with the OHCMD for additional support and technical assistance, and CAD will assess contract compliance during the next review.



ADMINISTRATION
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Rosalind Arrington, Children Services Administrator Department of children & Family Services Contract Compliance Section 3530 Wilshire Blvd., 4<sup>th</sup> Floor Los Angeles, CA 90010

Dear Ms. Arrington,

The following Corrective Action Plan Addendum is in regards to the Exit summary dated 5/24/17.

- A new plan has been set into place in order to avoid any late submissions of SIR's. Agency is to ensure that all SIR's are submitted on a timely manner. Resource Parents have been reminded to report Special incidents in a timely manner by calling the FCSW, daily duty worker or the after hours duty worker. The Director will read and submit the SIR within 24 hours of the incident. The director has created a log of SIR's in order to track them and will communicate closely with the the Assistant Vice President (AVP) when she needs backup. Aviva's FFA director or AVP will ensure that all SIR's are reviewed and submitted on a timely manner.
- The Foster Care Social Workers (FCSW) were retrained on 5/12/17 re: car Registration Protocol. Car registration will be collected from all Resource parents and logged in Foster Trak. Foster Trak has a master audit capability which allows us to track when the registration is up for renewal, therefore allowing us to remind the Resource Parent to turn in the new registration before it expires. A copy will be put in their file. On regular routine visits the FCSW will ensure that vehicles used to transport foster youth/NMDs have current registration tags. Aviva has added a check box at the bottom of page two on our Home evaluation to prompt the FCSW's to check for vehicle registration. FCSW will check vehicles regularly during home evaluations as well as home visits by physically viewing the car for safety and current tags.
- Agency is to ensure that the Resource Parents have a vehicle inspection prior to recertification. They will turn in all required documentation in order for recertification to happen on a timely manner. The vehicle inspection is tracked in Foster Trak as well. FCSW's were retrained on the importance of keeping all documents up to date and in the files and will check for any expired or missing documents on a quarterly basis.
- Agency will ensure that the resource home and yard are safe for youth/NMDs of all ages. The FCSW will walk the parameter of the home regularly for hazards such as bricks, torn screens and other debris. The Resource parent will be asked to remedy the situation immediately or as soon as possible. The FCSW will document in in the foster parent contact notes and follow up to ensure the



situation is remedied in a safe and timely manner. The home evaluation has a box on page two to prompt the FCSW to check outside play areas as well as window screens. On 4/21/17, the McNama Resource home replaced the torn screens and removed the bricks from the driveway. The home remains compliant in these areas at all times.

- Agency will ensure that all NSPs are comprehensive including FCSW-signatures and accurate dates. FCSWs were retrained on the importance of accurate dates for new and updated NSP goals. An achieved goal will be moved to the achieved goal section of the NSP. The new goal written in its place will have the correct start date of the month the NSP is written. The Director or AVP will make sure the FCSW has signed the NSP at the time they give their approval signature. The date on the NSP for goal #3 was a typographic error and has been corrected from 9/14/17 to 12/14/17. Staff has signed the 8/19/16 NSP.
- The FCSWs were retrained to include therapy dates in contact notes as well as NSPs. Staff will not make blanket statements regarding therapy. FCSW will attempt to get accurate dates of therapy by asking the foster parent, therapist and or school. If the therapist does not give dates to the FCSW, the FCSW will call the therapist and document attempts to get the dates will be documented in the file.
- Agency will ensure accurate and updated allowance logs are maintained and signed by the children. Foster Care Social Workers are trained on the importance of the children signing their allowance forms and keeping them in the child's file. FCSW's will periodically check the allowance amount to make sure the child/NMDs are receiving the correct allowance for their age. FCSW's will review the document monthly to ensure that all signatures are on the forms. Agency will ensure accurate clothing logs are maintained with the correct receipts attached. FCSWs were retrained on the importance of checking the receipts against the log for completion and accuracy upon receipt. The FCSW will compare the receipts to what is written on the monthly log for accuracy. The FCSW will turn in the monthly log for review and tracking in Foster Trak.

If you have any questions, please call me at (323) 876-0550 ext. 1114.

Sincerely,

Bridgette Baca, MA

Director of Family Resource Services